

Civil Action No. 2:17cv6

APR 20 2017

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

JOHN D. DUDLEY, CLERK
BY: *John D. Dudley*
DEPUTY CLERK

This summons for (name of individual and title, if any)
was received by me on (date) 4/14/17

Wise County Department of Social Services

I personally served the summons on the individual at (place)

on (date) _____ ; or

I left the summons at the individual's residence or usual place of abode with (name)

, a person of suitable age and discretion who resides there,

on (date) _____, and mailed a copy to the individual's last known address; or

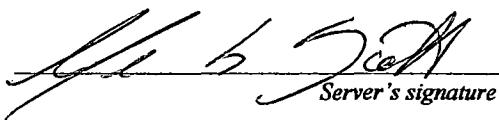
I served the summons on (name of individual) Charles Stemp, who is
designated by law to accept service of process on behalf of (name of organization) Wise County
Department of Social Services on (date) 4/17/17 ; or

I returned the summons unexecuted because _____ ; or

Other (specify): _____

My fees are \$ 10.00 for travel and \$ 7.25 for services, for a total of \$ 18.00.

I declare under penalty of perjury that this information is true.

Date: 4/17/17
Server's signatureMELINDA L. SCOTT

Printed name and title

PO BOX 1133-2014PMBB7 Richmond, VA 23218
Server's address

Additional information regarding attempted service, etc: